



Martinsville
A CITY WITHOUT LIMITS

APPLICATION FOR PERMIT TO BUILD

___ NEW ___ ALTERATION ___ MOVE ___ ADDITION ___ DEMOLISH ___ REPAIR

All applications must give name and address of owner and applicant, property information, and a listing of all contractors who will perform work on the project. Additional information may be submitted on separate sheets if necessary. Property owners applying for permits must complete the affidavit on back of form. Note that some projects require sealed drawings and site plans for approval. **NOTE: Separate permits are required for electrical, mechanical and plumbing work and driveway entrance cuts. Please request a Sign Permit Application from our Zoning Department if Signs will be Installed.**

OWNER INFORMATION

Name _____ Company Name _____

Address _____ City/State/Zip _____

Phone _____

APPLICANT INFORMATION

Contact _____ Company Name _____

Address _____

City/State/Zip _____ Phone _____

Applicant Is: Owner Contractor Other

PROPERTY INFORMATION

Location _____ Tax Map ID# _____

ZONING

SIGNS (LIST ALL) _____ Permit Obtained? Yes No

Office Use Only: ADDITIONAL APPROVAL REQUIRED?

Zoning District _____ Proposed Use: _____

Allowable Use? Yes No Enterprise Zone Yes No

Historic Info _____

Historic District: Martinsville (Uptown) Local East Church/Starling LSF Fayette St. LSF Martinsville (Uptown) SF

State/Federal Nomination? Yes No

SETBACKS REQUIRED: Front _____ Rear _____ Side(s) _____

Additional Setbacks _____ Parking Spaces Required _____

Planning Commission _____ Architectural Review Board _____

Board of Zoning Appeals _____ Site Plan Approved _____

Signature of Zoning Administrator _____ Date _____

BUILDING (B)

Present Use _____ Proposed Use _____

Type of Work _____

Dimensions: Area: _____ Square Feet: _____ # Floors _____

Est. Cost: _____ Fee: _____

ELECTRICAL (E)

Type of Service _____ AMPS _____ VOLTS _____ Occupancy _____

Type of Work _____

Est. Cost: _____ Fee: _____

MECHANICAL (M)

Type of Work: _____

Est. Cost: _____ Fee: _____

PLUMBING (P)

Type of Work _____ Total Fix _____

___ Shower ___ Dishwasher ___ Urinal ___ Water Softener ___ Heater ___ Bath Tub

___ Floor Drain ___ Backflow Prev. ___ Sinks ___ Grease Trap ___ Drinking Fountain ___ Lavatory

___ Floor Sink ___ Gas Outlet ___ Water Closet ___ Laundry Tray ___ Sewer Tap ___ Misc. _____

Est. Cost: _____

Fee: _____

OTHER: _____

Describe Work: _____

OFFICE USE ONLY

Construction Type I, II, III, IV, V

Use Group: A, B, E, F, H, I, M, R, S, U

Plans on File? YES NO

Permit # _____ Fee: _____

Approved: _____ Date: _____

	Name of Contractor & Address	License #	Contract Amt.
General			
Excavation			
Electrical			
Mechanical			
Plumbing			
Carpentry			
Sprinkler			
Other			

Residential projects only: State name, address and phone number of Mechanics Lien Agent If there is no agent please write the word "NONE" in the space below.

Mechanics Lien Agent Information

Name _____

Address _____

City, State, Zip _____

Phone _____

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable city and state laws, ordinances, rules and regulations now in force; and which are hereby agreed to by the undersigned applicant and which shall be deemed a condition entering into the exercise of the permit. In addition, if permit of work described in this application is issued, I certify that the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Applicant _____ Date _____

OWNERS AFFIDAVIT

I affirm that I am the owner of the property described in the application and that I have applied for a building permit. I affirm that I am familiar with the prerequisites of Section 54. 1-1111 of the Code of Virginia and I am not subject to licensure as a contractor or subcontractor. I am also aware that it is a violation of State Law to hire or award a contract to an unlicensed contractor. Signed and acknowledged by:

OWNER _____ DATE _____

WITNESS _____ DATE _____

SITE PLAN(S) Add Plans, Maps, Plats, Plans as needed

Draw sketch of project giving all dimensions and showing distances to existing buildings and property lines.

A large, empty rectangular box with a thin black border, intended for a site plan sketch. It occupies the majority of the page below the instructions.